DATEME AND MARKET AND								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective December 8, 2004							ORD	09/882089					
	RCE		S FILED - PART I (Column 1) (Column 2)				SMALL ENTITY TYPE		OF	OTHER THAN			
L	TOTAL CLAIM					RATE	FEE	7	RATE				
Ľ	OR	ИМВЕ	R FILED	NUM	BER EXTRA		BASIC FI	EE 391	OR				
Ľ	OTAL CHARGE	15 m	inus 20=	•			X\$ 25:		OR	1	1		
2	IDEPENDENT (/ n	ninus 3 =	8			X100=	+	┤``	Y000	 		
	IULTIPLE DEPE	NDENT CLAIM F	RESENT						 	OR		-	
*	If the difference	e in column 1 is	ess than zero, enter "0" in column 2				' L	+180=	200	4OR	L		
CLAIMS AS AMENDED - PART II								TOTAL	1375	OR		<u></u>	
_		(Column 1)	TINE (VDE	(Column 2) (Column 3)				SMALL	ENTITY	OR		R THAN ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		#		X\$ 25=		OR	X\$50=		
AME	Independent	A TATION OF M	Minus	***		-		X100=		OR	X200=		
	PINOT PRESE	NTATION OF MI	JUTIPLE DE	PENDENT	CLAIM			+180=		1 1	+360=		
				•			L	TOTAL		OR	TOTAL		
		(Column 1)		(Columi	n 2)	(Column 3)	A	DDIT. FEE	L		ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ST FR ISLY	PRESENT EXTRA	T	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	Ŕ	Minus	**		E	7	(\$ 25=		OR	X\$50=		
AME	Independent	ATATION OF MIL	Minus	***		=	1	K100=		OR	X200=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+360=		
								TOTAL DIT. FEE		L	-		
	(Column 1) (Column 2) (Column 3)									Al Al	DDIT. FEE		
2		CLAMS REMAINING AFTER AMENDMENT	m *	HIGHES NUMBEI PREVIOUS PAID FO	T R SLY	PRESENT. EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
: }	Total		/linus	**				F 05	FEE			FEE	
	Independent		Minus	4**		<u>.</u>		\$ 25= 100=), I	X\$50=		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	X200=		
16.	If the partials									OR.	+360=		
36.0	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." A									OR AD	TOTAL DIT FEE		
T	e "Highesi Numbe	er Previously Paid I	or" (Total or I	orace is les	is the h	s, enter "3." Ighest number (1.1.	opriate box				
	<u> </u>												